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UTILITY PATENT APPLICATION **TRANSMITTAL**

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Attorney Docket No.		032580.0060.CIP				
First Inve	ntor	GUST H. BARDY				
Title	SUBCUTANEOUS ELECTRODE WITH IMPROVED CONTACT SHAPE FOR TRANSTHORACIC CONDUCTION					

(Only for new nonprovisional applications under 37 CFR 1.53(b)) | Express Mail Label No.

EL675946465US

	APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.					ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231						
	1.	Fee Transmit	Transmittal Form (e.g., PTO/SB/17) mit an original and a duplicate for fee processing)			7.		D-R in duplicate	e, large table or	ō.		
	2.		ms small entity status.			8.	Nucleotide and/or Am (if applicable, all ned	•	. 80 80			
	3.	Specification (preferred arrangement set forth below) Descriptive title of the invention Cross Reference to Related Applications Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix					a. Compute b. Specification Se i. C	er Readable Fon quence Listing o CD-ROM or CD-l aper	on: R (2 copies); or	j1046 U.S 10/0139		
		 Background of the Invention Brief Summary of the Invention 			г	Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS						
		 Brief Description 	ription of the Drawing		-				et & document(s	11		
å.		Detailed Detailed Detailed DetailedClaim(s)	escription			9.		•		•		
H- 4			the Disclosure			10.	37 CFR 3.73(b) (when there is		Power of Attorney			
	4.	Drawing(s) (3	35 U.S.C. 113)	[Total Sheets 71	<u>]</u>]]	11.	English Transla	ation Document	(if applicable)			
d# 45	5.	Oath or Declaration		[Total Pages]]	12.	Information Dis		Copies of Citations	f IDS		
		a. Newl	y executed (origina	I or copy)		13.	Preliminary Am	endment				
4# 4#				ation (37 CFR 1.63 (If with Box 18 complete		14.		Postcard (MPE		4		
, #w		i	DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1 63(d)(2) and 1 33(b)		´	15.	nent(s) (if foreigi	n				
	6. Application Data Sheet. See 37 CFR 1.76					Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.						
						17. Other: Application Cover Sheet						
ž	18.	If a CONTINUING AF or in an Application D	PPLICATION, check	appropriate box, and	supply tl	he req	uisite information belo	w and in a prelin	ninary amendme	ent,		
ĺ		Continuation	Divisional	Continuation-i	in-part (Cl	IP)	of prior application No	r application No · 09/663,607; 09/663,606				
		Prior application information	Exam	niner		Group Art Unit:						
	5b, is	For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Bo 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								Box		
				19. CORRESPO	NDENC	E ADI	DRESS					
	Customer Number or Bar Code Label 23865 (Insert Customer No. of Attach ber code						or Correspondence address below					
	Name Jonathan L. Pettit											
Brobeck, Phleger & Harrison LLP												
	Address 12390 El Camino Real											
	City San Diego S		St	tate CA Zip Code			92130-208	1				
į	Cour	ntry	USA		Teleph	one	858/720-2500	Fax	858/720-25	555		
	Name	Jonathan L. Pettit Registration No. (Attorney/Agent) 40,770										
	Signa	ature	Jorath	tand. Ve	4	7		Date 1	1/5/01			

CONTINUATION-IN-PART APPLICATION

UNDER 37 CFR § 1.53(b)

TITLE:

SUBCUTANEOUS ELECTRODE WITH IMPROVED CONTACT

SHAPE FOR TRANSTHORACIC CONDUCTION

APPLICANT(S):

BARDY, GUST H.; CAPPATO, RICCARDO; RISSMANN,

WILLIAM J.; SANDERS, GARY H.

Correspondence Enclosed:

Utility Application Transmittal Sheet and FY 2001 Fee Transmittal Sheet (2pgs); Description (142 pgs); Claims (13 pgs); Abstract (1pg); Drawings Figures (71 sheets); Check in the amount of \$712.00; and

Return Postcard.

PRIORITY DATA:

Under 35 U.S.C. §120 this application claims the benefit of U.S. Patent Application Serial No. 09/663,606, filed September 18, 2000 and U.S. Patent Application Serial No. 09/663,607, filed September 18, 2000, and U.S. Patent Application entitled "SUBCUTANEOUS ELECTRODE WITH IMPROVED CONTACT SHAPE FOR

TRANSTHORASIC CONDUCTION."

"EXPRESS MAIL" Mailing Label Number <u>EL675946465US</u> Date of Deposit <u>November 5, 2001</u> I hereby certify under 37 CFR §1.10 that this correspondence (along with anything referred to as being attached or enclosed) is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" with sufficient postage on the date indicated above and is addressed to the Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

Josh Gibbs

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Complete if Known **FEE TRANSMITTAL** Application Number To be assigned Filing Date Herewith for FY 2002 First Named Inventor Gust H. Bardy To be assigned **Examiner Name** Patent fees are subject to annual revision. Group Art Unit To be assigned TOTAL AMOUNT OF PAYMENT (\$)712.00 Attorney Docket No. 032580.0060.CIP

METHOD OF PAYMENT	FEE CALCULATION (continued)						
1. The Commissioner is hereby authorized to charge indicated	3. ADDITIONAL FEES						
Deposit		Large Entity		Small Entity			
Account 50-1273	Fee	Fee	Fee	Fee	Fee Description	Fee Paid	
Number	Code	(\$)	Code	(\$)	•	Teeralu	
Deposit	105	130	205	65	Surcharge – late filing fee or oath		
Account Brobeck, Phleger & Harrison LLP Name	127	50	227	25	Surcharge – late provisional filing fee or cover sheet		
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1 17	139	130	139	130	Non-English specification		
Applicant claims small entity status See	147	2,520	147	2,520	For filing a request for ex parte reexamination		
2. ⊠ Payment Enclosed:	112	920*	112	920*	Requesting publication of SIR prior to		
	440	4 0 40+	440	4 0 404	Examiner action		
FEE CALCULATION	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action		
1. BASIC FILING FEE	115	110	215	55	Extension for reply within first month		
Large Entity Small Entity	116	400	216	200	Extension for reply within second month		
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	117	920	217	460	Extension for reply within third month		
101 740 201 370 Utility filing fee 370 00	118	1,440	218	720	Extension for reply within fourth month		
106 330 206 165 Design filing fee	128	1,960	228	980	Extension for reply within fifth month		
107 510 207 255 Plant filing fee	119	320	219	160	Notice of Appeal		
108 740 208 370 Reissue filing fee	120	320	220	160	Filing a brief in support of an appeal		
114 160 214 80 Provisional filing fee	121	280	221	140	Request for oral hearing		
SUBTOTAL (1) (\$)370.00	138	1,510	138	1,510	Petition to institute a public use proceeding		
2. EXTRA CLAIM FEES	140	110	240	55	Petition to revive – unavoidable		
Fee from Extra Claims below Fee Paid	141	1,280	241	640	Petition to revive – unintentional		
Total Claims 58 -20** = 38 X 9 00 = 342.00	142	1,280	242	640	Utility issue fee (or reissue)		
Independent 3** - V	143	460	243	230	Design issue fee		
Claims 3 0 0	144	620	244	310	Plant issue fee		
Multiple Dependent 0 0	122	130	122	130	Petitions to the Commissioner		
Large Entity Small Entity Fee Fee Fee Fee Fee Description	123	50	123	50	Processing fee under 37 CFR 1.17(q)		
Code (\$) Code (\$)	126	180	126	180	Submission of Information Disclosure Stmt		
103 18 203 9 Claims in excess of 20	581	40	581	40	Recording each patent assignment per property (times number of properties)		
102 84 202 42 Independent claims in excess of 3	146	740	246	370	Filing a submission after final rejection		
104 280 204 140 Multiple dependent claim, if not paid	149	740	249	370	(37 CFR § 1.129(a)) For each additional invention to be		
109 84 209 42 ** Reissue independent claims	143	740	243	370	examined (37 CFR § 1.129(b))		
over original patent 110 18 210 9 ** Reissue claims in excess of 20	179	740	279	370	Request for Continued Examination (RCE)		
110 18 210 9 ** Reissue claims in excess of 20 and over orig <u>inal patent</u>	169	900	169	900	Request for expedited examination of a		
SUBTOTAL (2) (\$)342.00	Other fo	e (specif	5 _V)		design application		
**or number previously paid, if greater; For Reissues, see above	í	ed by Ba	• •	g Fee P	Paid SUBTOTAL (3) (\$)		
SUBMITTED BY					Complete (if applicable)		

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)

Jonathan L. Pettut

Registration No. (Atterney/Agent)

Name (Print/Type)

Date

11/5/01

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Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Washington, DC 20231.

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